

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER CALIFORNIA REAL ESTATE POLITICAL ACTION COMMITTEE (CREPAC) - CALIFORNIA ASSOCIATION OF REALTORS <hr/> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> AREA CODE/PHONE NUMBER <hr/> </div> <div style="width: 35%;"> I.D. NUMBER (if applicable) 890106 </div> </div> <hr/> STREET ADDRESS <hr/> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> CITY LOS ANGELES </div> <div style="width: 20%;"> STATE CA </div> <div style="width: 30%;"> ZIP CODE 90020 </div> </div>			Date of This Filing <u>04/08/2015</u> Report No. <u>04082015</u> <input type="checkbox"/> Amendment to Report No. _____ (explain below) No. of Pages <u>2</u>	Date Stamp Page 1 of 2	<div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 1.2em;"> CALIFORNIA FORM 497 </div> For Official Use Only
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Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		

*Contributor Codes

IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

Reason for Amendment:

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AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 890106		Report No. 04082015		
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY LOS ANGELES	STATE CA	ZIP CODE 90020	No. of Pages 2		

Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
04/07/2015	HAMPTON FOR CITY COUNCIL 2015 PASADENA, CA 91104 ID# 1373811	TYRONE HAMPTON City Council Member Jurisdiction: Other CITY OF PASADENA, #1	\$1,000.00	04/21/2015
04/07/2015	TORNEK FOR MAYOR 2015 PASADENA, CA 91106 ID# 1364546	TERRY TORNEK Mayor Jurisdiction: Other CITY OF PASADENA	\$5,000.00	04/21/2015

Reason for Amendment: